SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, Wi 54891
(715) 373-6138

NISTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

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Agent Phone:	Contractor Phone:	Tron Ru	ailing Address:	ARY D PRIVY		Bayfield Co. Zoning Dant	NOV 28 2012	e Stamp (Received)	BAYFIELD COLUNTY, WISCONSIN	APPLICATION FOR PERMIT
Agent Mailing Address (include City/State/Zip):	Plumber:	Iron Riva W1 54849	Mailing Address: LINCA City/State/Zip: CIUCS 847 Telephone:	CONDITIONAL USE SPECIAL USE B.O.A. SOTHER	HOW DO FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.dig/zoning/asp)	On Dent	<b>7</b> □	1	VISCONSIN	PERMIT
City/State/Zip);			RIVES 847	SPECIAL USE 🗆 B.O.	N(visit our website www.ba	Refund:		Amount Paid:	Date:	Permit #: 16
Written Authorization Attached  Pes Do	Plumber Phone:	NC-591 745	7173726360	A. OTHER	ayfieldcounty.org/zoning/ast	To the second		サートの・の・ひ	10-2-10	の-046X 

	Non-Shoreland	☐ Shoreland —		Section 27	NW 1/4, NW 1/4	PROJECTLOCATION		Authorized Agent: (Per	Contractor:	Address of Property:	owner's Name:	TYPE OF PERMIT REC
		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	✓s Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain?  If yes—continue —	Section 27, Township 40, N, Range 9	1/4 Gov't Lot Lot(s)	Legal Description: (Use Tax Statement)		Authorized Agent: (Person Signing Application on behalf of Owner(s))	1521	Address of Property:		TYPE OF PERMIT REQUESTED—> LAND USE SAN
		ke, Pond or Flowage If yescontinue —	er, Stream (incl. Intermittent) If yescontinue	w Town of:	CSM Vol & Page	04- 04038		Agent Phone:	Contractor Phone:	Tron Ru	Mailing Address:	IITARY D PRIVY
The second secon		Distance Structure is from Shoreline:	Distance Structure is from Shoreline:	, L	Lot(s) No. Block(s) No.	04- 04 038.2-4K-04-000-100 Novolume		Agent Mailing Address (include City/State/Zip):	Plumber:	Tron King W1 54847	UNCH City/State/Zip:	SANITARY PRIVY CONDITIONAL USE SPECIAL USE
		Shoreline :	Shoreline : feet	Lot Size	lo. Subdivision	1000 Volume	Paradada	Dity/State/Zip):		49	RIVERS	
		□ Yes	Is Property in Floodplain Zone?	Acreage 38		Volume Page(s)	Dies Descri	Written Authorization Attached	Plumber Phone:	718-59104	243	☐ B.O.A. ☐ OTHER
		- Yes	Are Wetland Present?	1		cy Owner Suite	WO marship	horization	one:	まるアラ	Telephone: 71 7 3726360	HER

a a company of the company				10,80	•		Value at Time of Completion * include donated time & material
- Administration of the second	Property	☐ Run a Business on	☐ Relocate (existing bldg)	☐ Conversion	☑ Addition/Alteration	☐ New Construction	<b>Project</b> (What are you applying for)
Memory	☐ Foundation	□ No Basement	☐ Basement	2-Story	□ 1-Story + Loft	☑ 1-Story	# of Stories and/or basement
					Year Round	☐ Seasonal	Use
		None		<u></u>	□ 2	□ <b>1</b>	# of bedrooms
None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	∿ Sanitary (Exists) Specify Type: സ്റ്റ്ഡേർ	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System is on the property?
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evant to it)   Length: 52	Width:	2/6
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×	Other: (explain)		
×	Conditional Use: (explain)		
×	Special Use: (explain)		
	Language Control of the Control of t		-100
0	Accessory Building Addition/Alteration (specify) DOVIN AddIT) WI	2	
1	Accessory Building (specify)	X	□  Vlunicipal Use
( x	Addition/Alteration (specify)		
×	Mobile Home (manufactured date)		
×	<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)		
×	with Attached Garage		Commercial Use
×	with (2 <sup>nd</sup> ) Deck		
( X )	with a Deck		
( x )	with (2 <sup>nd</sup> ) Porch		
( x	with a Porch		▼ Residential Use
( ×	with Loft		
×	Residence (i.e. cabin, hunting shack, etc.)		
( x	Principal Structure (first structure on property)		and the second s
Dimensions	Proposed Structure	<u> </u>	Proposed Use
	Dimensions	Proposed Structure  Structure on property)  (ting shack, etc.)  (ck  d Garage  (d Garage  (eed date)	Principal Structure (first structure on property)  Residence (i.e. cabin, hunting shack, etc.)  with Loft  with A Porch  with 3 Porch  with 4 Deck  with 4 C2 <sup>nd</sup> Porch  with Attached Garage  Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or □ cooking & food prep facilities)  Addition/Alteration (specify)  Accessory Building (specify)  Accessory Building Addition/Alteration (specify)  Special Use: (explain)  Conditional Use: (explain)  (

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[[we] declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. 12 12 12 13 2

Owner(s): ( ) (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Work

(If you are signing on behalf of the owner(s) a letter of authorization must accondition and permit pany this application)

Date

Date

Attach
Copy of Tax Statement
rily purchased the property send your Recorded Deed

Signature of Inspector: A Hold For TBA: He	Inspertached?	Inspection Record: (Mr. (1450) MIX Mr. A EASTAY, SHEED (MR. MACH MACH) DE 1850 ED	Illy Created Yes □ No □ N	ற் ⊢—	Is Parcel a Sub-Standard Lot	Permit #: 12 - 141 \times Permit #: 12 - 141 \times Permit Date:	Issuance Information (County Use Only)  Sanitary Number:	one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.  (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).  NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  The local Town, Village, City, State or Federal agencies may also require permits.	Prior to the placement or construction of a structure within ten (10) feet of the minimum requiother previously surveyed comer or marked by a licensed surveyor at the owner's expense.  Prior to the placement or construction of a structure more than ten (10) feet but less than thirt.	Setback to Privy (Portable, Composting)	ing Tank	₹6 > 4	Setback from the North Lot Line 550 Setback from the South Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description: Measurement	(8) Setbacks: (measured to the closest point)	See attacked  Please complete (1) - (7) above (prior to continuing)		Show Location of (*): Show:
Hold For Affidavit:	cited by: <b>QQ</b> □ <b>Yes</b> : □ <b>No</b> -{lif <u>No</u> they need to be attached.}	E MACH MAULABLE		Previously Granted by Variance (B.O.A.)	No Mitigation Required No Mitigation Attached		mber:	<u>mstruction, Septic Tank (ST), Dr.</u> 1) Year from the Date of Issuance I relling: <u>ALL</u> Municipalities Are Requelly, State or Federal agencies may it.	red setback, the boundary line from which the v (30) feet from the minimum required setback	J. C. S. Co.		Feet	Feet	Feet Setback from the Lake (ordinary Feet Setback from the River, Stream, Setback from the Bank or Bluff	nent			(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	(*) <b>Driveway</b> <u>and</u> (*) <b>Frontage Road</b> (Name Frontage Road) All <b>Existing Structures</b> on your Property
Hold For Fees:	٥	20 Zo	Were Property Lines Represented by Owner	by Variance (B.O.A.) Case #:	□ Yes KNo		# of bedrooms:	ain field (DF), Holding Tank (H in field (DF), Holding Tank (H if Construction or Use has not b uired To Enforce The Uniform I ilso require permits.	e setback must be measured must be visib k. the boundary line from which the setb:			% Slope Area	itland	y high-water m , Creek	Description	Changes in plans must be approve		*) Holding Tank (HT) and/or (	oad)
Date of Approval:	ate of Re-Inspection:	Zoning District $\{\lambda\}$ Lakes Classification $\{\beta\}$	] Yes		Affidavit Required		anitary Date:	roposed site of the structure, or must by [M], Privy (P), and Well (W). begun.  Dwelling Code.	ble from one previously surveyed corne back must be measured must he visible t	,	* \$	W		nark) 18° (C	Measurement	ed by the Planning & Zoning Dept.		(*) Prîvy (P)	

## Glavin Permit

